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Feb 19 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000000682 (1)

1. Corporation Name

PETERS, ROBERTSON, LAX, PARSONS, WELCHER, MOWERS  
& PASSARO, P.A.

Principal Place of Business

25 SE 2ND AVENUE  
SUITE 800 INGRAHAM BLDG.  
MIAMI FL 33131

Mailing Address

25 SE 2ND AVENUE  
SUITE 800 INGRAHAM BLDG.  
MIAMI FL 33131-1506



3. Date Incorporated or Qualified  
01/03/1995

3a. Date of Last Report  
01/30/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

65-0564741

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

ROBERTSON, NEIL P  
25 SE 2ND AVENUE  
SUITE 800 INGRAHAM BLDG.  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	ROBERTSON, NEIL P	
STREET ADDRESS	5991 NE 6TH COURT	
CITY-ST-ZIP	MIAMI FL 33137	
TITLE	D	DELETE
NAME	LAX, MICHAEL H	
STREET ADDRESS	10320 SW 103RD TERRACE	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	D	DELETE
NAME	PARSONS, JOHN R	
STREET ADDRESS	670 NE 59TH STREET	
CITY-ST-ZIP	MIAMI FL 33137	
TITLE	D	DELETE
NAME	WELCHER, ROGER G	
STREET ADDRESS	835 MALAGA AVENUE	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	D	DELETE
NAME	MOWERS, JEFFREY A	
STREET ADDRESS	261 N.E. 97TH ST.	
CITY-ST-ZIP	MIAMI SHORES FL 33138	
TITLE	D	DELETE
NAME	PASSARO, GERALYN M	
STREET ADDRESS	4912 UMBRELLA TREE LANE	
CITY-ST-ZIP	TAMARAC FL 33319	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	O/D	Change	Addition
1.2 NAME	Parsons, John R.		
1.3 STREET ADDRESS	670 NE 59th Street		
1.4 CITY-ST-ZIP	Miami, FL 33137		
2.1 TITLE	O/D	Change	Addition
2.2 NAME	Lax, Michael H.		
2.3 STREET ADDRESS	10320 SW 103rd Terrace		
2.4 CITY-ST-ZIP	Miami, FL 33178		
3.1 TITLE	O/D	Change	Addition
3.2 NAME	Passaro, GERALYN M.		
3.3 STREET ADDRESS	4912 Umbrella Tree Lane		
3.4 CITY-ST-ZIP	Tamarac, FL 33319		
4.1 TITLE	D	Change	Addition
4.2 NAME	Robertson, Neil P.		
4.3 STREET ADDRESS	5991 NE 6th Court		
4.4 CITY-ST-ZIP	Miami, FL 33137		
5.1 TITLE	D	Change	Addition
5.2 NAME	Mowers, Jeffrey A.		
5.3 STREET ADDRESS	261 NE 97th Street		
5.4 CITY-ST-ZIP	Miami Shores, FL 33138		
6.1 TITLE	D	Change	Addition
6.2 NAME	Welcher, Roger G.		
6.3 STREET ADDRESS	835 Malaga Avenue, Coral Gables, FL 33134		
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John R. Parsons* John R. Parsons as President 2/14/97 305 374 3103  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)